An
Inaugural Essay
on
Pneumonia
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Pneumonia

This is an inflammation affecting some of the viscera of the thorax, or the membrane which lines the interior surface of that cavity: when it attacks the pleura, it is known by the name of pleuritis &, when it has taken place in the substance of the lungs peripneumonia. There may be some difference between the two: but we have no symptoms by which we can distinguish them; and if there were it would be of no importance, since the treatment in both cases is precisely the same.

Whether inflammation be seated in the pleura, or in the lungs, it is known by the same symptoms viz First a sense of uneasiness about the thorax, and a cough so slight as to be entirely overlooked, or regarded as nothing more than such as in a greater or less degree frequently attends fevers, and

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the patient is believed to labour under nothing more than common fever, shivering alternating with fits of heat; thirst and anxiety, breathing hurried; the pulse more frequent than natural, and the temperature of the skin increased. Generally this disease makes its attack in a much less ambiguous way. A severe pain and a dry cough, with much difficulty of breathing, and a sense of weight and pain in the breast immediately under the sternum, extending back between the shoulders; increased by inspiration; restlessness, loss of appetite and sleep, the pulse frequent hard and strong & in the advanced stage of the disease, the pulse for the most part is weak soft and at the same time irregular. The difficulty of breathing is one of the symptoms of this disease which is almost always present

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and is found to be most considerable in inspiration, increasing as the disease advances; it is often short and frequent the violence of the pain preventing a full inspiration, when the pain is either dull, or absent, the breathing is oppressed and laborious. accompanied with anxiety and a sense of weight about the praecordia. Sometimes the pain is much greater when the patient is in some par=ticular posture. It is said to be greatest when he lies on the side affected, some=times the reverse of this takes place. In many cases the easiest position for the patient is on his back, and frequently the erect posture is found to be the one which the patient prefers. Cough another attendant and very distressing symptom of this

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disease is greater in some persons than others, and accompanied by more or less pain, it is sometimes dry in the commencement, but at others it is attended with expectoration. But altho it is dry at the beginning, it seldom continues so during its whole progress. The colour and consistence of the matter expectorated varies very much in its appearance. At the commencement it is generally thin becoming thicker as the disease advances; sometimes the matter is streaked with blood, this ought to be attended to, as it is a point of some importance in a part of the treatment of pneumonia.
The pain in this disease is felt in different parts of the thorax which has given rise to the varieties of pneumonia mentioned by authors. The disease is always seated, or at least begins, in some part of

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the pleura, which not only lines the cavity of the thorax, but covers the pericardium, forms the mediastinum, and covers the whole surface of the lungs. In considering the extent of this membrane we may easily account for the pain not being confined to any particular point, as we sometimes find it affecting the breast just under the sternum, between the shoulders, on the back; but the place of all others the most frequent is the left side, sometimes higher or lower. But writers tell us, it is usually about the sixth or seventh rib.

The pain is sometimes dull and obtuse, but oftener severe and pungent. It is much severer when it attacks the place just mentioned, & most commonly it remains fixed in one point; but it occasionally shifts from its primary seat and attacks

another part of the thorax. It may exist in one part of the pleura only, or it may be communicated to some other parts, and in many the membrane through its whole extent may become affected.

With respect to pneumonia, the causes are the same as with all other internal inflammations. The most frequent is the application of cold to the body, giving a sudden check to perspiration, thereby causing a considerable influx of blood to the pulmonary organs. It occurs most frequently in the winter and spring seasons of the year, and particularly under a variable and unsettled state of the weather sometimes there are but few cases, at others there may be many owing to sudden changes in the atmosphere from heat to cold. It attacks principally those of strong constitutions,

when there is a tendency to inflammatory
diseases, occurring in the system.
Certain other causes such as violent exercise,
or making some powerful exertion of the
lungs, producing an increased action in
them, have been known to occasion the
disease. Such exertions as speaking, playing
on instruments of wind, singing, &c may
induce. I also the breathing of certain
deleterious gases such as the fumes of
arsenic, sulphur and the mineral acids.
The treatment of pneumonia, like
all other inflammations is divided
into general and local. It differs not
little from all other inflammations,
the chief and only difference arises
from the nature and an increase
of the organ affected. The first thing
to be considered in the management
of pneumonia is general and local

bloodletting, which should in every instance be carried to such an extent as to occasion a tendency to syncope, at least in a manner to relieve the symptoms such as pain and debility. If regulation were the blood comes to run from the arm, the vessel may agree as to the propriety, I think, of this operation. It is directed to cover vessel, giving his voice in his own way, in that in them may the largest and recovered. There is no fact better ascertained than the efficacy of nature selection, if used in reducing inflammation. It is admitted, that the quantity of blood drawn from a vein varying in size, more or less efficacious, as have the general for relieving from a small orifice, a circumstance so highly important in practice that

should never be forgotten. It is not in any matter to give any, even rule, as to the extent to which venesection should be urged in this disease much more danger is to be apprehended from the timid than from the extensive use of the lancet in general. I should in the case of a robust and vigorous constitution with confirmed fever the increasing strong and the respiration difficult, take twenty or thirty ounces of blood at the first bleeding and if this should not answer the purpose in a few hours the operation may be repeated perhaps nearly to the same extent. The small and repeated bleedings employed by some practitioners are always attended with inconvenience. They harass and debilitate the patient without contributing proportionately to the

are. If the inflammation has continued for a few days the capillary vessels become dilated and as these are in some degree independent of the heart and great arteries a stagnation of blood from the general circulation will now take place and from this pathological view is proved to be correct and is illustrated in the success of the prognosis; for example, in intermittent fever we cannot expect a cure without local depletion, for the purpose of emptying the capillary vessels. The same thing applies to pneumonic inflammation. But here we must not too hastily recommend the use of the lancet for venesection is still necessary to relieve the lungs, provided the heart maintains its vigour, as a vast quantity of blood is constantly flowing through from and must aggravate

the inflammation. [illegible] [illegible] [illegible] [illegible] [illegible]
[illegible] from the arm [illegible] [illegible] [illegible] [illegible]
[illegible] [illegible]. Dr [illegible] Cullen [illegible]
opinion is not considered as groundless.
It may be objected that drawing blood
from [illegible] [illegible] [illegible] [illegible] [illegible] in
[illegible] [illegible] making [illegible] [illegible] inflamed [illegible]
[illegible] is more [illegible] [illegible] it from the other
The view we have in taking blood from
the arm [illegible] [illegible] [illegible] the [illegible] a large
which is accomplished equally well
from whatever vein the blood is taken,
provided it be in the same [illegible]
and equally near the center of circulation
After we have reduced the inflammation
as far as [illegible] by the general
[illegible] [illegible], we are next to resort to local
means, and of these the most efficient
are blisters. By some their utility is
[illegible]. but there is no doubt of their

[illegible] the action of external [illegible]
in the [illegible] [illegible] [illegible] [illegible] period they
arrest the further progress of disease and
prove curative in extraordinary cases.
But when they are applied to every that
is upon the surface of external action.
They seem [illegible] to aggravate the symptoms
which they are intended to remove and
in [illegible] to cause great distress to
the patient. The air should be large
and applied immediately over the seat of
pain or if there is no pain, on the anterior
part of the thorax. If the symptoms do
not cease after this repeat to support
the discharge from the bladder, part
or to apply a succession of blisters which
is preferable. It is necessary to apply them
to some part of the thorax as little or
no advantage will arise from their
application to more distant parts. It now

may be proper to mention the advantages that do sometimes accrue from a judicious bleeding by means of cups applied to the sides of the chest or spine. This can be resorted to at any stage of the disease, and after general bleeding we will often have reason to be much pleased with their effects. Don't forget to speak of those medicines which induce evacuations from the alimentary canal. These are valuable for many inflammatory affections, aiding in reducing the force of circulation, in stimulating the external vessels on the surface, the intestines and in the copious effusions of serum the vessels are relieved, as it is so much taken from the circulating mass. In this way we are told by Dr Chapman, they produce the best, energetic excitement and render important service in the management of fevers and inflammatory cases.

purging which is so remarkable in inflammatory affections does not seem to answer so important a purpose here as in some other cases. Cathartics after the administration of jalap, I cannot recommend as the same other cathartic medicine as jalap, it will be necessary to keep the bowels in a relaxed condition by the use of castor oil or some of the neutral salts. By the combined action of the remedies already mentioned the excitement of the inflammation is in all instances reduced. The next remedies to be employed are those which are calculated to promote perspiration. But experience teaches us that except in the burning stage they are almost useless if not hurtful. It is stated by many that copious perspirations at the commencement of the complaint in many instances has either prevented, or greatly mitigated

the acute and rheumatic mania. Yet it is frequently necessary when arterial action is reduced with the same view as mentioned, or equalizing excitement and extinguishing the acute stage of pneumonic inflammation. Here the ascepias decumbens or pleurisy root seem to be very serviceable. As a diaphoretic it is distinguished by great certainty, and permanency of operation as well as the inestimable property of reducing its effects without increasing much the force of the circulation or creating inordinate and restless pulses. In this disease it is very well adapted to the remote stage of it and many other inflammatory diseases. In the coughs of the dissection this class of remedies is used as auxiliaries to venesection, as nitre and ipecacuanha and the antimonials as soon as the cough becomes loose and

expectoration takes place, then the disease is broken and it becomes necessary to resort to the various cough mixtures —
When the disease has abated, some of the more violent symptoms remain, as lightness of the chest and a dry hard and sharp cough, when these continue the best prescription is Ipecacuanha, opium and calomel repeated at short intervals, this will allay irritation, and procure rest.
In protracted cases of this kind the cure may be accelerated, and at the same time rendered more certain and compleat, by slightly touching the mouth with mercury
To effect this one grain of calomel may be added to one of the antimonial powders; and if requisite a few drops of laudanum given occasionally to prevent them from purging. In the treatment of pneumonia it is of some importance that the disease

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be completely cured. If any remnant of the cough be left it facilitates or invites a return and consumption not unfrequently follows. Cough is much more certainly removed by pushing bloodletting to the necessary extent than any other remedy we can use.